PTO/SB/30 (09-06)
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ork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Request	Application Number	10/607,809		
for Continued Examination (RCE)	Filing Date	June 27, 2003		
Transmittal	First Named Inventor	Leonard KATZ		
Address to: MS RCE	Art Unit	1652		
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Examiner Name	H. Robinson		
	Attorney Docket Number	300622004810		

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If								
applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).								
a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.								
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on								
ii. Other								
b. x Enclosed								
i. X Amendment/Reply (Preliminary Amendment - 10 pages) iii. Information Disclosure Statement (IDS)								
Fee Transmittal (1 page plus duplicate								
iiAffidavit(s)/Declaration(s) ivOther pages); Return Receipt Postcard								
2. Miscellaneous								
a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a								
period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)								
b. Other								
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.								
a. X The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments to Deposit Account No.  03-1952 I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.								
i. X RCE fee required under 37 CFR 1.17(e)								
ii. Extension of time fee (37 CFR 1.136 and 1.17)								
iii. Other								
b. Check in the amount of \$enclosed								
c. Payment by credit card (Form PTO-2038 enclosed)								
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED								
Signature Seruda Wallach Date February 16, 2007								
Name (Print/Type) Brenda J. Wallack Registration No. 45,193								

I hereby certify that this paper is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 761 644 269 US, on the date shown below in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: February 16, 2007

Signature:

(Judy Calem)

02/20/2007 GWORDOF1 00000068 031952 10607809 790.00 DA

FEE TRANSMITTAL FOR TY 2006  Application Number   10/607,809   Filing Date   June 27, 2003   Filing Date   June 27, 2004   Fil	FEB 16 T	he Passwork Reduction A	ct of 1995, no person	ı are requir	U.S. ed to respond to a co	Patent and Tra	ademark Office: U	.S. DEPARTM	PTO/SB/17 (07-0 007. OMB 0651-003 ENT OF COMMERO OMB control numbe
FEE TRANSMITTAL  FOOT FY 2006  Applicant claims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT (\$) 790.00 Attorney Docket No. 300622004810  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):  X Deposit Account begins (3.1952 begins to Account Name. Morrison & Foerster LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  X Charge fee(s) indicated below  X Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FillING FEES  SEARCH FEES  Application Type  Fee (\$)	1.60	.00							
FOR FY 2006  Applicant claims small entity status. See 37 CFR 1.27  AT Unit 1652  TOTAL AMOUNT OF PAYMENT (\$) 790.00  Attomey Docket No. 300622004810  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):    Deposit Account Deposit account tumber, 03-1952 Deposit Account Name. Morrison & Foerster LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee   Charge fee(s) indicated below   X   Charge fee(s) indicated below, except for the filing fee   X   Charge fee(s) indicated below	Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Number 1		10/607,809				
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Check   Credit Card   Money Order   None   Other (please identify):	Applican	t claims small entity statu	ıs. See 37 CFR 1.2	7	Art Unit 1652				
Check Credit Card Money Order None Other (please identify):    Deposit Account   Deposit Account   Deposit Account   Number 03-1952   Deposit Account   Deposit   Deposit Account   Deposit	TOTAL AMOU	NT OF PAYMENT	(\$) 790.00		Attorney Docket	No.	30062200481	0	
	METHOD OF	PAYMENT (check	all that apply)						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    X   Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee (s) charge any additional fee(s) or underpayment of (see(s) under 37 CFR 1.16 and 1.17	Check	Credit Card	Money Order	Nor	ne Other	(please ident	ify):		
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Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17   X   Credit any overpayments   X   Credit any overpayments   Telephone   X   Credit any overpayments	For the	above-identified depo	sit account, the D	irector is	hereby authorize	ed to: (chec	k all that apply	)	
X   Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17   X   Credit any overpayments   X   Credit any overpayments   Telephone   X   Credit any overpayments   X   Credit any overpayme					<u> </u>	-		•	he filing fee
Application Type				ment of	=			·	
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Fee Description  Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Extra Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Pee Paid (\$)  Pee (\$)  Fee Paid (\$)  Registration No. (Aktomey/Agent)  Non-English Specification, \$130 fee (no small entity discount)  Other (c.g., late filing surcharge):  1800 1800 1800 1800 1800 1800 1800 180					-	Ť	v		Small Entity
Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  19  -20 = 0	Fee Description							Fee (\$)	
Multiple dependent claims  Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims  19 -20 = 0 x = 0.00 Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  2 -3 = 0 x = 0.00  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  -100 = /50 (round up to a whole number) x =   4. OTHER FEE(S) Fees Paid (\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1801 Request for Continued Examination (RCE) 790.00	Each claim over	r 20 (including Reiss	ues)					50	25
Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims  19	-	· ·	uding Reissues)					200	100
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2 -3 = 0 x = 0.00  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  -100 = /50 (round up to a whole number) x =   4. OTHER FEE(S) Fees Paid (\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1801 Request for Continued Examination (RCE) 790.00	•	•	•					0.00	
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SUBMITTED BY Signature Brenda Wallach Registration No. (Attorney/Agent) 45,193 Telephone (858) 720-7961	Other (e.g., l	late filing surcharge):	1801 Request	for Con	tinued Examin	ation (RCE	<u> </u>		90.00
Signature Brenda Wallack Registration No. (Attorney/Agent) 45,193 Telephone (858) 720-7961	SUBMITTED BY				<u> </u>				
	Signature	Brenda	wall-			45,193	Telephone	(858) 72	0-7961
	Name (Print/Type)	Brenda J. Wallaci		<u> </u>	(Automos/Adem)		Date	<u> </u>	